

**SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT****FORM SPAC
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: 9
COMMITTEE NAME Citizens for an Improved Arlington		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 856 Arlington, Texas 76004-0856		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. NICKNAME	FIRST John LAST Borton	MI E. SUFFIX
		Receipt #	Amount
		Date Processed	
		Date Imaged	
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1801 W. Park Row Dr. Arlington, TX 76013		
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 856 Arlington, Texas 76004-0856		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (817) 261-3471		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year 08 / 23 / 2007 THROUGH 10 / 08 / 2007		
11 ELECTION	ELECTION DATE Month Day Year 11 / 06 / 2007 ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		

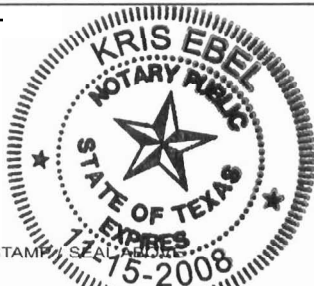
GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

**Form SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Citizens for an Improved Arlington		ACCOUNT # (Ethics Commission filers)		
13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICEHOLDER	CANDIDATE / OFFICEHOLDER NAME		
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)		
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION / # Proposition 1		ELECTION DATE Month Day Year 11 / 06 / 2007
		DESCRIPTION Arlington Crime and Control District		
14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ -0-	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 19847.59	
	EXPENDITURE TOTALS 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		\$ -0-	
	4. TOTAL POLITICAL EXPENDITURES		\$ 9382.00	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 10365.59	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ -0-	

15 AFFIDAVIT



AFFIX NOTARY STAMP

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]
Signature of campaign treasurer

Sworn to and subscribed before me, by the said John Eric Borton, this the 8th day of October, 20 07, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Kris Ebel
Printed name of officer administering oath

[Signature]
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A
Page 1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4	
2 FILER NAME Citizens for an Improved Arlington		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/24/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Media Allies 6 Contributor address; City; State; Zip Code 6008 Lavaca Dr. Arlington, TX 76018	7 Amount of contribution (\$) In-kind contribution of \$162.50 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable) In-kind contribution for 3.25 hrs of media services.
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/3/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Susan Ashley Borton Contributor address; City; State; Zip Code 618 Raintree Ct. Arlington, TX 76012	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/3/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Randle H Meadows Contributor address; City; State; Zip Code 500 Throckmorton St. Fort Worth, TX 76102	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/2/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jim Greenwell Contributor address; City; State; Zip Code 610 Waggoner Dr. Arlington, TX 76013	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/12/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Michael Patterson Contributor address; City; State; Zip Code 2310 W. Interstate 20 Suite 100, Arlington, TX 76017	Amount of contribution (\$) \$200. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A
Page 2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4	
2 FILER NAME Citizens for an Improved Arlington		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/26/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pat Bridges <hr/> 6 Contributor address; City; State; Zip Code 7600 Bogart Dr. N. Richland Hills, TX 76180	7 Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/20/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Travis W. Cope <hr/> Contributor address; City; State; Zip Code 5901 Flintshire Ct. Arlington, TX 76017	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/26/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Long <hr/> Contributor address; City; State; Zip Code 7105 Truver Lane Arlington, TX 76001	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 8/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert G. Rivera Campain <hr/> Contributor address; City; State; Zip Code 1921 Edgehill Dr. Arlington, TX 76010	Amount of contribution (\$) \$500. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/7/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodney W. Thompson <hr/> Contributor address; City; State; Zip Code 2310 W. Interstate 20 Suite 100, Arlington, TX 76017	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A
Page 3

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4	
2 FILER NAME Citizens for an Improved Arlington		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/1/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Brook W. Rollins <hr/> 6 Contributor address; City; State; Zip Code 2131 N. Collins St. Arlington, TX 76011	7 Amount of contribution (\$) \$120. (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/19/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Franklin Patrick <hr/> Contributor address; City; State; Zip Code P.O. Box 200426 Arlington, TX 76006	Amount of contribution (\$) \$500. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/14/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: William Landolt <hr/> Contributor address; City; State; Zip Code 620 W. Division St. Arlington, TX 76011	Amount of contribution (\$) \$127.59 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/19/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Sue Phillips <hr/> Contributor address; City; State; Zip Code 415 Joyce St. Arlington, TX 76010	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 9/23/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Melvin V. Leblanc Jr. <hr/> Contributor address; City; State; Zip Code 2720 Mark Twain Ct. Arlington, TX 76017	Amount of contribution (\$) \$550. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

Page 4

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4	
2 FILER NAME Citizens for an Improved Arlington		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/26/07	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jesse Minton <hr/> 6 Contributor address; City; State; Zip Code 4315 Waycross Dr. Arlington, TX 76016	7 Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/2/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Theodore Eby <hr/> Contributor address; City; State; Zip Code 6008 Lavaca Dr. Arlington, TX 76018	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/2/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Antonio Molina <hr/> Contributor address; City; State; Zip Code 333 Throckmorton St. Apt.807, Fort Worth, TX 76102	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/3/07	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Russell Green <hr/> Contributor address; City; State; Zip Code PO Box 2564 Arlington, TX 76004	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$) (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**CORPORATE OR LABOR ORGANIZATION
CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS****SCHEDULE C**

Page 1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C: 2	
2 FILER NAME Citizens for an Improved Arlington		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/21/07	5 Corporation / Labor Organization name Reliable Paving, Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 1903 North Peyco Dr. Arlington, TX 76001	7 Amount of contribution (\$) \$5000. (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
Date 9/21/07	Corporation / Labor Organization name Andalusa Builders, Inc. Corporation / Labor Organization address; City; State; Zip Code 2401 Wimbledon Dr. Arlington, 76017	Amount of contribution (\$) \$5000. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Date 8/30/07	Corporation / Labor Organization name Stadium Parking LLC Corporation / Labor Organization address; City; State; Zip Code 2809 Harder Dr. Arlington, TX 76016	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Date 8/31/07	Corporation / Labor Organization name Blue Star Investments, Inc. Corporation / Labor Organization address; City; State; Zip Code One Cowboys Parkway, Irving, TX 75063	Amount of contribution (\$) \$2000. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Date 9/06/07	Corporation / Labor Organization name Amigos En Azul Arlington Corporation / Labor Organization address; City; State; Zip Code P.O. Box 1672, Arlington, TX 76004	Amount of contribution (\$) \$2000. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Date 9/19/07	Corporation / Labor Organization name Hicks Sports Group LLC Corporation / Labor Organization address; City; State; Zip Code P.O. Box 90111, Arlington, TX 76004	Amount of contribution (\$) \$2000. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
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CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE C
Page 2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C: 2	
2 FILER NAME Citizens for an Improved Arlington		3 ACCOUNT # (Ethics Commission filers)	
4 Date 9/22/07	5 Corporation / Labor Organization name Stephen Alexander Inc. 6 Corporation / Labor Organization address; City; State; Zip Code 3001 Motley Dt. Ste. G, Mesquite, TX 75150	7 Amount of contribution (\$) \$500. (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
Date 9/14/07	Corporation / Labor Organization name The Man Shop Corporation / Labor Organization address; City; State; Zip Code 100 South West St. Arlington, 76010	Amount of contribution (\$) \$100. (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$) (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F: 1
2 FILER NAME Citizens for an Improved Arlington		3 ACCOUNT # (Ethics Commission filers)
4 Date 9/17/07	5 Payee name Clear Channel 6 Payee address; City; State; Zip Code 3700 E. Randol Mill Rd. Arlington TX 76011	7 Amount (\$) \$4162.
8 Purpose of payment (See instructions regarding type of information required.) Outdoor advertising (If travel outside of Texas, complete Schedule T)		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 9/17/07	Payee name City of Arlington Payee address; City; State; Zip Code 2800 S. Center St. Arlington TX 76014	Amount (\$) \$100.
Purpose of payment (See instructions regarding type of information required.) Rental of meeting space (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 10/2/07	Payee name Media Allies Payee address; City; State; Zip Code 6008 Lavaca Dr. Arlington, TX 76018	Amount (\$) \$4620
Purpose of payment (See instructions regarding type of information required.) Printing of yard signs (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 9/17/07	Payee name Jus Cause Payee address; City; State; Zip Code PO Box 200185, Arlington, TX 76006	Amount (\$) \$500.
Purpose of payment (See instructions regarding type of information required.) Payment for rental of meeting space (If travel outside of Texas, complete Schedule T)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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